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INDICATION FORM**

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|------------------------|------------------------------------|
| Application Number | 10/599109 |
| Filing Date | 20 September 2006 |
| First Named Inventor | Eystein Borgen |
| Title | A METHOD FOR REDUCTION OF AXIAL... |
| Art Unit | |
| Examiner Name | |
| Attorney Docket Number | P19187USPC |

I hereby revoke all previous powers of attorney given in the above-identified application.

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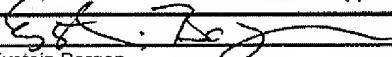
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I am the:

Applicant/Inventor.
 Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-------------------|---|-----------|--------------------|
| Signature |  | Date | 12th of March 2007 |
| Name | Eystein Borgen | Telephone | |
| Title and Company | | | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 1 forms are submitted.

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